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ABSTRACT

This report describes the Bismarck, North Dakota site of the Child and Family Resource Program (CFRP), a Head Start-affiliated program designed to elicit community and family involvement in fostering optimum development of preschool children. The Bismarck program, located at one of 11 demonstration sites of the national CFRP, was coordinated by the Bismarck Early Childhood Education Program (BECEP). In planning and implementing the Basmarck CFRP, attention was given primarily to five areas of service development for CFRP families: (1) health care, (2) education, (3) parent involvement, (4) social services, and (5) special services (e.g., a "Positive Parenting Class," transportation, special educational services, and full day care). Descriptions of staff positions in the program are presented. Also outlined are: (1) the staff training plan, (2) the recruitment procedure for families (including a needs assessment procedure), (3) methods of coordinating CFRP and community agency services, (4) materials used in the program, (5) program costs (including accounting charts), and (6) a short evaluation of program implementation. (BRT)

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PROGRAM DESCRIPTION

CHILD AND FAMILY RESOURCE PROGRAM

BISMARCK, NORTH DAKOTA

Under Contract No. HEW-OS-74-274

Submitted To:

OFFICE OF CHILD DEVELOPMENT
DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

PS 008486

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Submitted By:

DEVELOPMENT ASSOCIATES, INC.
1521 New Hampshire Ave., N. W.
Washington, D. C. 20036

June 30, 1975

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BISMARCK CFDP

PROGRAM DESCRIPTION

INTRODUCTION

The Bismarck Public School District #1 is the grantee for the CFDP. The School District has been involved with Head Start programs since 1965 when a summer program serving 280 children in six centers became operational. In 1970 this was converted to a full nine month program serving 75 children in one center.

In 1971, in cooperation with the Burleigh County Department of Social Services, the School District established full day care services for 36 children ages 3-6 years. This was expanded in 1972 to include a summer day care program for 50 children. Also in 1972, a demonstration program for multi-handicapped children was added to the expanding variety of child development programs.

This proliferation of programs in early childhood development led to the formation of the Bismarck Public Schools Child Development Center which subsequently evolved into the Bismarck Early Childhood Education Program (BECEP), the current operational and administrative vehicle for these programs. The BECEP concept and current program model reached its current status with the writing of the proposal and subsequent funding of CFDP.

The BECEP concept is important in understanding both program administration and staff utilization for the early childhood development programs in Bismarck. All these programs are administered centrally by the BECEP Director, who is, in turn, responsible to the Superintendent of Schools, who in turn reports jointly to the School Board and the Policy Council. An indicator of intra-agency cooperation is that the County Department of Social Service Day Care Program and the Head Start Program mutually support each other by applying funds in program areas where the other agency cannot. This combination of financial and program resources provides BECEP with significant program parameters (eligibility, in-kind contributions, service provided, etc.) in providing a wide array of early childhood development services to the community.

The BECEP administers and coordinates the activities of the various programs that comprise it. The Director assures that staff skills, materials, transportation and other resources are used to maximize program effectiveness. This means that certain special staff knowledge or skills are shared between all programs determined by program needs. Another point is that many aspects of staff training for all BECEP programs are similar and this training is planned and held jointly, thus contributing better trained personnel and programs. The intermingling of staff assignments to various inter-program responsibilities is also reflected in the budget where many BECEP staff salaries are budgeted among the various programs.

In late fall 1972 Bismarck Public Schools Child Development Center was informed that Bismarck was selected to participate in a qualification procedure for the Region V CDEP demonstrations. The Bismarck Public School officials and the Policy Council decided to accept the challenge and Child Development Center staff was authorized to submit the program prospectus furnished by OEO. In early 1973, they were informed that they were one of two programs selected to submit formal proposals for a CDEP in their Region.

Serious planning and liaison effort with community agencies and persons was an integral part of mobilizing talent throughout Bismarck and Burleigh County to plan their CDEP and develop the required proposal. A planning group consisting of Child Development Center staff, community agency representatives, parents, and interested citizens was formed to do the actual planning work. The members of this planning group met during work-day evenings and on small odds throughout the early months of 1973. Consequence to this effort was the matter of personal time and sacrifice since most members of the planning group had other full-time responsibilities. The dynamics of this effort were indicated by a unique spirit of cooperation which contributed significantly to the success of the overall planning effort. One participant remarked that, "even if we weren't successful in acquiring a CDEP, the communication and mutual understanding developed during the planning was worth the price." Their final product was submitted on April 6, 1973. The program became effective on June 15, 1973.

The planning group members were confident that they had developed a program approach that reflected the program experience and growth in early childhood development programs that Bismarck Public Schools had gained over the years. They also felt that the CDEP proposal reflected the cultural and socio-economic realities of the Bismarck area.

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1. [illegible] Program Objectives

   a. [illegible] activity to [illegible] [illegible] [illegible]

1. [illegible] [illegible] [illegible]

- Health;
- Education (formerly part of Developmental Services);
- Parent Involvement (formerly part of Developmental Services); and
- Social Services (formerly Family Support Services).

To indicate the major focus of each component and some of the more important services provided CFRP families, each component is discussed separately:

1. Health

The major focus of the Health Component is prevention and education in all areas of health, including medical, dental, nutritional, and mental. An emphasis is placed on needs assessment in these health areas. Some of the services of this component are:

- General health screening for entire family;
- General dental screening - emphasis on children 2-8 years of age;
- Home nursing care;
- Physical therapy for handicapped children;
- Well baby clinic;
- Family planning counseling;
- Prenatal classes and care;
- Nutritional classes;
- Psychiatric help;
- Psychological counseling;
- Assessment service for handicapped children; and
- Classes for handicapped children in the areas of:
  - trainable mentally retarded;
  - speech therapy;
  - behavior modification; and
  - physical skills program.

2. Education

The Education Component is concerned with total family involvement in the educational development of their children. Also, parents are encouraged to further their own education and/or develop skills. Some of the services/ programs in this component include:

- Early Stimulation Program;
- Parenting Skills;
- Home Based Activities for children and parents;
- Day Care;
- School experience for Handicapped Children;
- Tutoring for children;
- Tutoring for Parents for GED;
- Vocational Education;
- Head Start; and
- Lending Closet.

3. Parent Involvement

The Parent Involvement Component seeks to assist CFRP families to better function in interpersonal relationships. The following are some of the principle activities of the Parent Involvement Component:

- Nutritional program;
- Parenting skills workshops;
- Red Cross first aide workshop;
- GED classes;
- Father - Son Gym Night;
- Parent Policy Council;
- Parent Room;
- Family Fun nights;
- Parent Volunteers; and
- CFRP parent activities (i.e., awards dinner).

4. Social Services

The Social Service Component focuses on helping parents gain confidence in their own ability and assisting them to become independently capable in identifying and solving family problems including the utilization of community services. Services in this component area are listed below:

- Homemaker service;
- Day care;
- Family therapy;
- Marriage Counseling;
- Vocational rehabilitation services; and
- Psychological testing and evaluation.

- Foster care;
- Food stamps;
- Emergency food and clothing aid;
- Housing aid.

5. Special Services

There are several CFRP activities that are directed towards filling identified service gaps in the community and/or make important contributions to general CFRP effectiveness. Because of the special character of these services and their positive influence on the program, the more significant have been identified and presented in summary form below. The following summaries include a description of the service and the rationale for inclusion in the CFRP.

a. Early Stim (Stimulation)

This service is provided to assist the total (emotional, cognitive, language and physical) development of infants and toddlers through 3 years of age. The Family Educator is responsible for the curriculum and activities. Staff members from various component areas and trained volunteers work with the parents on materials and guidance in providing early stimulation to promote the total development of infants and toddlers. Since starting in January, 1975, some of the weekly topics have included:

- Children's play;
- Right learning tools for children;
- Emergencies in the home and how to meet them;
- Building childrens' toys;
- Interpreting children's art;
- Behavior problems and how to handle them;
- Personality development;
- Interpreting children's stress; and
- Nutrition.

Staff and volunteers work with children providing group experience within their own age range and working on developmental skills. This program uses the Lending Closet (See page 14) as a resource. It provides materials for parent's use concerning books and toys that may be helpful in their children's development. Direct parent involvement is integral to this service. Parent participation includes sessions to develop/design/enjoy parent activities and training sessions to provide skills for gaining child development skills for home use. This program was developed in response to a national OCD/CFRP directive indicating positive steps in this area.

b. Expansion in Parent Education

This service includes GED, vocational testing, tutoring and training, and workshops for various skills. The Family Educator is a resource to adults for tutoring when necessary. The Parent Worker and family advocates, by working closely with the parents, are responsible for determining parent training needs. This program is included in CFRP as a response to parents' needs.

c. Positive Parenting Class

This service is a direct result of parent requests and planning activities. The parents investigated the possibility of having a training course in how to become more effective parents. They found the funding through the State Board for Vocational Education - Department of Home Economics, which will be matched by BECEP - CFRP. They also located the teacher for this training program and planned its organization. This training course will be implemented in late Spring 1979.

d. Transportation Outreach

This is an extended transportation service to bring to the CFRP center children from outlying areas who do not have any way of getting to the center for classes and medical purposes. This service has increased parent participation at the center and has been responsible for creating better services for children and their families who could not avail themselves of these services if it were not for this transportation. This was done in response to parent requests.

e. Mandan Center

This three day per week center in Mandan (located across the river from Bismarck) is for children aged 6-7 who could not cope with the public school for a variety of reasons. Readiness preparation is given to these children to enable them to go back to school. Bismarck has a center which serves this purpose, however, a center in Mandan was opened because of transportation problems.

f. Parent Involvement Activities

The Parent Worker and Aide work with parents in planning activities as a response to parent requests and the innovation of the CFRP staff. Parents, as a result, have participated in many training sessions and workshops designed by staff in response to the parents ideas and suggestions. They also have organized family activities, such as Father-Son Gym Nights, Family Fun Nights, and awards dinner given by parents for staff. A parents' room is also equipped with literature and resources for parents.

g. 4-H

This is an after school organized service for all CFRP children. It was started because there weren't any organized programs for youths, such as Girl Scouts or Boy Scouts, available for most CFRP children. Being a rural area, it was felt that 4-H would be more relevant to the Bismarck environment.

h. Coordination with Public School

This service is designed to insure smoother transition for preschool children into the public school system. The Follow-up Teacher helps the children and their families make this change by tutoring the children, if necessary, and conferring with the first grade teachers on the childrens progress. She also evaluates the progress the children are making and provides assistance such as tutoring.

This service was initiated not only to insure smoother transition, but to evaluate CFRP's children's progress as they leave the program so the effectiveness of CFRP can be determined.

i. Full Day Care

This service is provided through the Burleigh County Department of Social Services. It is, however, limited to potential, present and former welfare recipients. Because 99% of CFRP's families are below income, most of them qualify for the Day Care Program. This program was already in BECEP when CFRP was planned.

j. Lending Closet

The BECEP Lending Closet is used as a resource to CFRP families for educational toys, games, small sports equipment, books, and records. The Lending Closet also provides clothing and loan materials, such as sewing machines, record players and adult education books relevant to GED classes. This program was planned in the original proposal and has been found to be a relevant project for this CFRP community.

In summary, the Bismarck CFRP is providing the minimum services defined by the guidelines. In addition all applicable components and services are in compliance with the Head Start Performance Standards. Despite several early organizational and staff problems the program made a concerted effort to remedy this situation. This effort has been successful and by Spring 1975, community services available (some for the first time as a result of CFRP) to CFRP families were supplemented by actual services from CFRP staff designed to fill certain "service gaps" in the community.

III. STAFF

A. Program Planning and Staffing

Within the overall umbrella of BECEP, staff planning for the CFRP was relatively straightforward. The planners always considered that the CFRP staff would draw on other BECEP staff as program needs dictated and vice-versa. It seems fair to say that this concept was so ingrained in the thinking of key planning staff that they did not feel it necessary to go into great detail in their proposal as to how this aspect of the system would work. This is probably due to the reactive nature of the concept - i.e., as situations arise, respond appropriately.

Since the planners saw CFRP essentially as a service coordinating program first and as a service providing program second, staff experience and skills tilted more toward these coordinating and support functions. This is apparent when examining the staffing plan developed by the program planning committee.

The planners saw BECEP staffs (which include Head Start) as having a core of experienced and trained personnel to provide continuity and stability during the expansion of the CFRP ideas into an operational program. New staff members were to be added, and in some cases, BECEP staff would assume additional responsibilities in meeting CFRP objectives and goals. In addition certain experienced BECEP staff reassigned fully into CFRP; this filled new program positions with fully trained and knowledgeable BECEP professionals. Thus, while several new positions and program responsibilities were created they were not necessarily manned by new or inexperienced personnel.

A brief examination of the staffing pattern developed during planning which shows the CFRP positions and the percentage of time devoted to CFRP follows:

CEEP Positions	% of total time spent exclusively on CEEP duties	% of total time shared with other activities
Program Director	50%	50%
Community Resource Specialist/ Administrative Assistant	75	25
Business Manager	80	20
Director of Education/Training	100	
Director of Health Services	100	
Coordinator of Community Resource Administrative Assistance	100	
Family Specialist	100	
Nutritionist	100	
Two Program Aides (Family Advocates)	100	
Leading Client Manager	100	
Home Based Teacher	100	
Secretary	100	

The planning staff prepared extensive job descriptions for these positions (two are attached as examples to indicate their approach). The general requirements for positions in their CEEP are as follows:

- Program Director.

  Bachelor of science degree in education with emphasis on early childhood development. Master of arts in education and administration and/or related experience with programs dealing with preschool children, exceptional family units, public relations, and supervision.

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- Coordinator of Handicapped Children Program and Day Care

  A Bachelor of Science degree in Education, with emphasis on Early Childhood Development. Should have related experience with programs dealing with preschool children, total family units, public relations and supervision. Must provide own transportation.

- Health Services Specialist

  Must have her RN from either a two year, three year, or four year nursing program, preferably with graduate work toward a degree. Should have experience in Pediatrics/Child Care. Must have an empathy for disadvantaged and the expertise to work with them through a multi-disciplinary approach. Must provide own transportation.

- Head Family Advocate

  Bachelor of Science Degree in Social Services, Public Health Nursing, Family Relations, and/or equivalent in experience in working with other programs dealing with low-income family units, children, parents, and their needs.

- Community Resource Specialist

  Must have demonstrated abilities in meeting with agencies, organizations, and community people. Must have an understanding of disadvantaged families, their feelings and needs. Must have a working knowledge of available resources and community organizations. Must furnish own transportation.

- Family Educator

  Must have a degree in Education and/or demonstrated competencies in working with children and their families. Must be able to understand and work with disadvantaged children and their families. Must be able to work with the total family unit.

- Follow-Up Teacher

  Must have a Baccalaureate degree in Early Childhood Education or Elementary Education and/or demonstrated competencies in working with young children. Must furnish own transportation.

As an indication of how CFRP staff members allocated their time, the following table shows the percent of time the CFRP reported its staff spent in each program category. These data were derived from the CFRP Information Reporting System and present figures for the period of January 16 through April 15, 1975, a three month period. (Complete

definitions of activities included in each of the program categories may be found in Section VIII.)

STAFF UTILIZATION PER CATEGORY

PROGRAM FUNCTIONAL CATEGORIES (SEE SECTION VIII FOR DEFINITIONS	PERCENT OF TIME TOTAL STAFF SPENT IN CATEGORY
1.1 General Health Medical and Dental	8.5%
1.2 Mental Health	1.2%
1.3 Nutrition	2.1%
1.4 Handicapped	1.7%
2.0 Education	14.3%
3.0 Social Services	12.3%
4.0 Parent Involvement	5.2%
5.0 Staff Training	22.5%
6.0 Administration	32.2%

IV. TRAINING PROGRAM

A. Planning and Startup

Although the planners spent significant time in considering staff training, no real plan resulted. The general result of their attention during this period was to include CFRP staff in the training for other BECEP programs. This can be attributed to the fact that the planners saw similarities in the activities of many BECEP programs and saw no reason to duplicate training. Further, they felt combining staff training in this manner would serve to get the new CFRP staff familiar and involved with other BECEP activities and staff. Thus, while no formal staff training plan resulted during planning, the planners did consider staff training needs and potential delivery mechanisms. They felt that the Startup Phase would be the appropriate time to develop and implement pre-service staff training.

Primary responsibility for developing and conducting staff training fell to the Project Director, the Career Development Committee, and various Component Coordinators. Consistent with the BECEP approach, an analysis of training needs was made of CFRP and the other programs as well; similar training needs were combined and training was planned and conducted to meet these needs. This general pre-service training supplemented the CFRP specific training.

The Project Director provided overall coordination and administrative support in addition to assuring quality control of the technical content and manner of training presentation. Within this framework a pre-service staff training plan was developed.

Since most BECEP activities are conducted on a nine-month cycle (September - May), training began in September.

Although the various CFRP component coordinators planned the pre-service training for their activities, the combination of similar training needs with a BECEP-wide staff training program diffused specific program training. Some examples of similar staff training include: orientation to and explanation of the BECEP concept and operating procedures; explanation of the operation of each BECEP program, how they interrelate and support sister programs, and development of general techniques for combining with BECEP participants. Specific staff training focused on preparing individual staff for their explicit CFRP duties and responsibilities commensurate with their component assignments. Whenever training with CFRP could be combined, the Project Director coordinated the pre-service training.

The first three days of pre-service training were primarily orientation to BECEP in general and CFRP in particular. The BECEP concept and components were explained and specific CFRP job descriptions and

responsibilities detailed. During this period a unique feature of the Bismarck program was implemented. All CFRP staff members studied their job assignments closely and then developed and signed work agreements with the Project Director that detailed their responsibilities. The process of developing these written agreements was an important ingredient in developing staff understanding not only of their individual roles but how these roles interacted to provide CFRP services to participant family members.

One problem was significant during staff training in that it produced mixed results for the program. The mingling of all similar training under the BECEP aegis placed a burden on staff trainer time availability. Since program coordinators were responsible for training in areas other than CFRP some CFRP training needs did not receive a high priority of trainer time. This resulted in a general lack of direction at the important time of the pre-service training.

On the other hand, the saying - "necessity is the mother of invention" - proved true here. Part of the general approach to pre-service training was to have the new staff work with various agencies to learn how they functioned and to develop appropriate professional contacts for use when CFRP implementation began. The original plan called for a controlled approach to this aspect of the training. Since training staff time was not fully available, the new staff were given more time and less supervision and were instructed to accomplish this training task essentially on their own. Although some of the new staff suffered traumatic experiences getting started on this field training exercise, they soon learned how to function in this generally unstructured environment. Unintentioned as this lesson was, it resulted in some important staff preparation for effective CFRP work. The real product of this training activity was that the staff formed closer professional and personal contacts with counterparts in the various community agencies that would be serving CFRP families.

B. Implementation

The objectives of training are to enrich staff, parents, and volunteer competencies for purposes of carrying out BECEP/CFRP concepts and to help staff and parents meet their own educational needs and goals. The Head Family Advocate is responsible for CFRP training in conjunction with the Program Director and other component heads who plan pre-service and in-service training for the entire BECEP staff, parents, and volunteers. The practice of having staff members study their job assignments and then develop and sign work agreements which explain their role and responsibilities within the program was continued.

A week of pre-service training is given to all BECEP staff (presented at the beginning of the new program year) in September of the operational year. During this week the Program Director and Component Coordinator give lectures and lead discussions on the concepts and philosophy of BECEP. An understanding of the available community resources, operational procedures, and how the four programs in BECEP (Day Care, Head Start, Handicapped Programs for children 0-8 years of age and Child Family Resource Program) relate to each other are emphasized.

Pre-service training for staff members hired after the September pre-service training session is provided on an informal basis. During the first week of employment, the new staff members are given readings relevant to BECEP proposals and concepts. Their immediate supervisor works with them for on-the-job training and conducts personal conferences to aid them in any areas where there is a need for further explanation and/or help.

Once a month the BECEP Center closes for a day of in-service training for all BECEP staff members. This training takes the form of workshops with consultants and/or BECEP staff, films, groups discussion, tours, demonstrations, and role playing sessions based on expressed needs and/or interests of staff members. The following is an outline of topics used for 1974-75 BECEP Workshops.

- September 1974 - "Methods and Procedures of Family and Child Assessments";
- October 1974 - "Resources within the Family; Resources within the Community;"
- November 1974 -"Parent Involvement;"
- December 1974 -"Learning Disabilities;"
- January 1975 -"Parent Counseling;"
- February 1975 -"BECEP Planning, Evaluation, and Program Projections;"
- March 1975 -"Methods and Techniques for Home and Classroom;"
- April 1975 - "Teaching and the Five Senses";
- May 1975 -"Concepts of Program Evaluation;"
- June 1975 - "What is Outreach"

In addition to BECEP's monthly in-service training sessions, many community workshops are available to CFRP staff on a basis of individual needs. Some of these workshops include the following topics:

- Personnel Management;
- Early Childhood Education;
- Individualized Prescriptive Teaching;
- Child Abuse;
- Indian Cultures;
- Worry Clinic;
- Environmental Workshops;
- Career Education;
- Indian Curriculum;
- Innovations and Approaches;
- Interagency Cooperation;
- Parenting;
- Puppetry; and
- Mental Retardation.

The Bismarck staff feel a need for more formal pre-service training for staff members who join CFRP during the operational year. They want to develop a pre-service training package for these staff members which would include materials on BECEP overview, personnel policies and procedures, and various materials relevant to the particular staff member's program responsibilities. This revised pre-service training session would be supervised by the training officer; for CFRP staff members this would be the Head Family Advocate.

Another interesting aspect of Bismarck's BECEP training is that they have formalized scheduled training sessions for parents and volunteers. Parents have a pre-service workshop in August concerning the objectives and concepts of BECEP. Once a month parents have an in-service training session which covers such topics as:

- How to run a meeting;
- Know your community agencies;
- Arts and Crafts Festival;
- Stretching the Shrinking Food Dollar
- Tour of United Tribes;
- Early Childhood Development;
- Early Childhood Discipline;
- Accident Prevention and First Aid; and
- Sewing for Summer.

At the beginning of the SECEP operational year, volunteers in selected CFEP parents and/or concerned community personnel) held a pre-service training workshop to introduce volunteers to the program and to help them understand the needs of the program and their role in SECEP. Once a month an in-service workshop or activity is scheduled. The topics of these workshops and/or activities include:

- Human Relations and Communications;
- Know your community agencies;
- Mid-evaluation of Programme by volunteers;
- Modeling for Children;
- Friend;
- CHCA and the community volunteer;
- Program values to volunteers;
- Planning Session for next year's volunteer program.

In summary, the Bismarck CFEP staff did not develop their pre-service training until the program Startup Phase. Although certain circumstances hindered the full implementation of an entire plan, pre-service training was effective. An interpretation and/or explanation given by a staff member who was introduced to CFEP by pre-service training indicated that the training plan and the CFEP approach were sound and personal relationship processes produced the type of staff members who were capable of dealing successfully with the situation as they found it. With the benefit of the training experience the staff, if they could do it all over, would develop a better knowledge for utilizing staff training capability to alleviate misconception demands on the trainers' time.

5. [illegible]

A. [illegible]

[illegible] members of the planning committee [illegible] community involved in planning and implementing [illegible] programmes. [illegible] [illegible] Education Programme, [illegible] Education Programme. Both of these programmes have [illegible] [illegible] of services to [illegible] [illegible]. The supervisors and programme [illegible] [illegible] [illegible]

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One of the 48 pages from this Directory is included below to illustrate its contents and scope. This Directory was completed during the planning process.

The general consensus of many of the CFRP staff is that the entire process of involving the community agencies was one of the strong points of the planning process. One factor that contributed to this apparently successful cooperative seemed to be that previous child development programs of the Bismarck Public Schools had sought and received community agency cooperation, advice, and service. Thus, the precedent of cooperation with and between community agencies was already established when CFRP began its planning.

The significant CFRP contribution to this evolving inter-agency cooperation was that previous efforts were focused primarily on specialized programs (Head Start health/dental care, handicapped children, etc.). CFRP, on the other hand, presented a broad spectrum program and a real opportunity for the agencies involved to consider much wider areas of service delivery. Conversation with several representatives of these agencies seemed to bear this out. Many of the agencies representatives expressed opinions that not only did the CFRP planning experiences develop interesting and new directions for them vis-a-vis the CFRP but new vistas were opened in inter-agency cooperation in other non-CFRP related activities.

Another significant point was that the Bismarck Public School System was more than a conduit for a variety of federal funds in the area of Early Childhood Development programs for Bismarck; it consciously and carefully allocated resources in support of the programs in excess of minimum non-federal share requirements. In addition to providing the usual space/facility for the program it also assigned staff who performed specialized and technical consultant services for the program. This demonstration of publicly committing scarce resources and of confidence and approval by the largest service agency in the community obviously influenced other agencies and to some extent, contributed to the atmosphere of agency cooperation in Bismarck.

Because of this intensive and comprehensive planning effort the Startup Phase did not pose any serious problems to the newly funded CFRP. Procedures for referrals, participating in needs assessment, coordinating delivery of services were already outlined and key staff identified. The Startup effort in this area of the program entailed a continued contact and liaison with the community agencies to assure that the planned coordination procedures and service delivery system were still current and available.

COMMUNITY RESOURCE DIRECTORY

SERVICE	AGENCIES	Contact Person and Staff Role	Performance Standards this agency can meet	
			Component	Performance #
Assessment of the social, educational and economic strengths, goals, aspirations and resources within the family.	Memorial Mental Health and Retardation Center 1007 N. W. 18th Mandan	663-6575	Social Services Education	B-1, 3(except (e) 4(b)(c) B-1, 2(a)(b)(c) 3, 4, 7(b)(d)
	Area Social Service Center Randall Bldg. Hwy. 83 N	M. Edwin Nuetzman (area administrator)	Social Services	B-1, 3(except e) 4(b))c)
	State Employment Security Bureau 201 E. Bdwy. Bismarck	Ralph Lange (Director) DeWayne Peterson Les Torgerson	Parent Involvement	B-3(e)
	State Employment Bureau 216 N. 2nd Bismarck	224-2880		
	Bismarck Senior Citizens Program	Victor Netzer (Director)	Social Services	B-3(a)(b) (c)(e)(f)

B. Implementation

Coordination in Bismarck between CFRP and the social service agencies is based on both formal and informal agreements between CFRP and the individual agencies regarding the responsibilities and duties of both to best meet the needs of the CFRP families they serve. The role of this staff is to act as a central agency coordinating community agencies which in turn provide needed services to the CFRP families. In addition, if CFRP feels certain services which are necessary to meet the needs of CFRP families are not available, they try to develop either new resources or new programs to fill these gaps (see Section II).

The CFRP enjoys positive relations and experiences good cooperation with the community agencies associated with the Program. Part of this is attributed directly to the planning process activities that brought representatives of many of these agencies together in a joint planning effort. On the other hand, the CFRP staff, throughout the Implementation Phase has continued to apply a proportionate amount of their time in this area in a constant effort to improve and maintain the network of formal and informal contacts basic to coordination and delivery of services. For example, part of pre-service staff training includes visits to the community agencies to learn the agencies' procedures first hand and to initiate informal contacts with peers in these agencies. In another instance, where various agencies duplicate each others' services, CFRP staff attempts to distribute referrals proportionately among all agencies concerned. One final example includes the fact that agencies are constantly referring families to CFRP indicating, in the opinion of CFRP staff, a confidence in the program and its capability.

The principal staff members responsible for the daily communication between CFRP and community agencies are the Family Advocates. They contact these agencies daily in behalf of their assigned families either to check on the delivery of the service by the agency and/or the receipt of the service by the family. In those cases where agency services are to be applied to a number of families or are of a special technical nature (i.e., any of which are beyond the normal scope of the Family Advocate) an appropriate CFRP coordinator or specialist is responsible for the liaison. This approach usually matches staff expertise and capability to the magnitude of the service delivery problem with resulting efficient use of staff time that is particularly appreciated by the agencies.

The Community Resource Specialist acts as the BECEP/CFRP public relations person to community agencies and resources. She arranges and gives interviews, (T.V., radio, press) with input concerning content from the staff, local resources, and consultants. She is responsible for identifying and locating materials and funds from private sources and groups to supplement all BECEP's programs and services. She functions as liaison between BECEP

and community agencies to create a better understanding of BECEP's philosophy and relationship to the community.

The staff is also approaching the problem from another direction. Numerous attempts are made by the CFRP to alert parents to the availability of services throughout the community and procedures to follow to receive them. For example, every month an article about one of the community agencies and the services it provides is featured in the BECEP newsletter so the CFRP families are aware of existing services on a resource basis. Another approach focuses on CFRP concern for a more comprehensive guide of community agencies and services and, as of Spring 1975, the staff has been working on a new Directory of Community Resources. This guide will be cross referenced for agencies and services instead of simply listing agencies and services provided.

There are two general problem areas of an outstanding nature that contribute to some difficulties in coordination. The first concerns the reluctance and/or refusal of some families to avail themselves of services for which they are eligible. In most instances this involves a regional characteristic of independence which manifests itself, for example, by many families refusing to apply for or accept food stamps due to pride, i.e., one does not accept welfare. The second problem involves disagreements between CFRP and an agency concerning interpretation of that agency's guidelines as applied to a particular service delivery situation. CFRP staff recognizes that in both cases there are no quick or easy solutions. They acknowledge these are chronic problems and continue to work to resolve them.

As previously mentioned, the CFRP is working constantly to maintain and improve good relations with the service and support resources for CFRP families. These include a large number of state, local, and community agencies and organizations. These resources are organized and listed under the appropriate component areas.

1. Health

- Mandan Mental Health and Retardation Center - childrens' diagnostic services and treatment, counseling for parents and children, and psychological and social screening for adults.

- Burleigh County Social Services/Area Social Services Center - Medical assistance and Early Periodic Screening and Diagnostic Treatment program EDSDT.

- Bismarck Hospital - prenatal care class, physical therapy for children, student nurses for classroom health programs, nutritional information, and counseling for post natal and infant care.

- Mandan Hospital - inpatient - outpatient services.
- March of Dimes - variety of physical disabilities testing, therapy, and equipment.
- Muscular Distrophy - money for diagnostic testing and wheelchairs and other equipment for handicapped children.
- Easter Seals - physical therapy pool and equipment for handicapped children.
- La Leche League - breast feeding classes and mini-sessions.
- North Dakota Lung Association - TB screenings and heart screenings.
- Crippled Childrens Services - funds for testing, operations and other medical services for crippled children.
- City Nursing - immunization for children, hemoglobin tests, TB screening, family planning services, child delivery, well baby clinics, home health care, nutrition counseling, and programs planning assistance in coordinating CFRP preschool screenings.
- Army Reserve Unit - general physical screenings for children.
- St. Alexius Hospital- prenatal classes, nutrition information, and counseling for post natal and infant care.
- State Dental Association - dental screening.
- Maternal and Child Welfare - well baby clinics, city nursing, and prenatal classes.
- Health Service Advisory Committee - doctors and other medical personnel for advice on health problems.
- Mary College - student nurses for classroom health programs.
- Red Cross - multimedia for handicapped training.
- North Dakota Health Planning Council - in-service training for CFRP.
- State Laboratory - testing of medicine and foods in emergency situations.

2. Education

- Bismarck Junior College - testing in GED for parents, in-service training for staff and parents, classroom aides in Head Start, and psychologists.

- Mary College - consultants for Early Childhood Development Program, personnel for staff training, proposal writing aid, and student social workers for BECEP.

- Menden Memorial Mental Health and Retardation Center - consultants for Parent Effectiveness Session.

- Volunteer Action Committee - volunteers for Early Childhood Development Program.

- Burleigh County Social Services - Area Social Service Day Care Centers services, school social worker program and staff training resource.

- North Dakota Division for Vocational Rehabilitation - aptitude testing, counseling and adult education (parenting skills).

- Bismarck Public School System - classroom space, transportation, hot lunches, support personnel, psychologist, training, workshops and adult education, and video tape equipment.

- Red Cross - first aid training program for parents and staff.

- North Dakota Employment Security Bureau - in-service training for staff.

- City Nursing - in-service training for staff and parents.

- Public Library - Bismarck - assistance in proposal writing and information resource.

- Catholic County Service - staff training resource.

- Army Reserve Unit - printing supplies and equipment for program publication.

- North Dakota Security Bureau - in-service training for CDEP staff.

3. Parent Involvement

- Public Library - Bismarck - summer programs in parks and activities for mothers one afternoon per week.

- Burleigh County Social Services/Area Social Service Center - demonstration for making creative toys at home for parents.

- Parents without Partners - recreational activities for single parents.

- YWCA - recreational activities for families.
- Volunteer Action Committee - babysitting services.
- Lutheran Social Services - Friends Program (Pairs teen & adult) training in parents with suggestions to family supplies. Plans (s) to develop communication between people with special problems to support each other).

- Social Services

- Meadow Mental Health and Rehabilitation Center - case consulting on family needs assessment and short training materials.
- Volunteer Action Committee - material for Leading Clubs, emergency transportation, and volunteers for group printing.
- North Dakota Division of Vocational Rehabilitation - job placement and counseling.
- Burleigh County Housing Authority - supervised housing (plus part of cost for low income housing available for parents).
- Burleigh County Senior Citizens Program - volunteers for Head Start programs.
- Burleigh County Social Services/Area Social Service Center - food stamps, homemakers services, family counseling, vocational rehabilitation services, psychological testing and evaluation, foster care, unwed parent counseling, and emergency assistance.
- Catholic County Service - family counseling, counseling for unwed mothers and adoption.
- Lutheran Social Services - family counseling, adoption, and aid to unwed mothers.
- Children's Village - family counseling, adoption, and aid to unwed mothers.
- The Lord of Life Lutheran Church - money for 4-H Programs.
- 4-H County Extension Office - aid to BOCES's 4-H Program.
- Missouri Slope Lutheran Home - day care retirement home giving activities for adults with disabilities.

Reimbursement assistance to

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TOTAL COST DATA FOR Bismark, N.D. (Program)

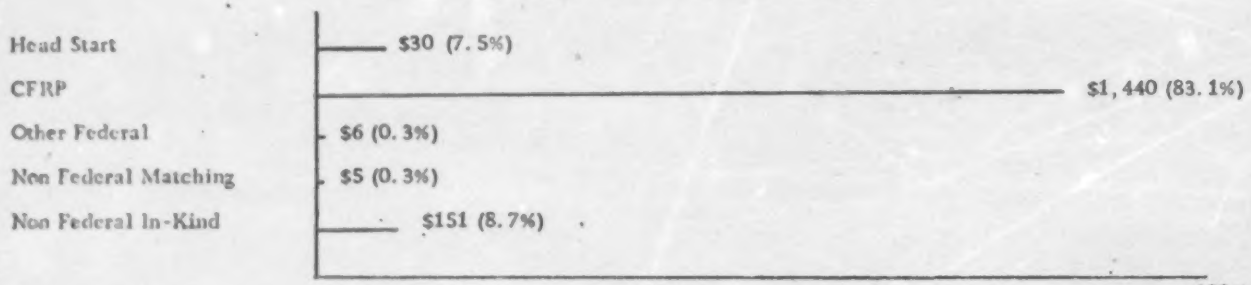
OMB No. 185-S-76013
Approval Expires: 30 June 1975

Program Cost Report

Report Period: From Oct / 25 / 74 to Jan / 25 / 75

Item	Direct Costs		Other Costs		Other Costs		Non-Fed. Matching		Non-Fed. In-Kind		Totals	
	Grant Funds	Non-Grant Funds	Grant Funds	Non-Grant Funds	Grant Funds	Non-Grant Funds	Grant Funds	Non-Grant Funds	Grant Funds	Non-Grant Funds	Grant Funds	Non-Grant Funds
	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
1. Personnel												
Salaries and Wages			12,021								12,021	
Fringe Benefits												
Consultants (salaried)	8,379	121	64	269	64	44	4,631				13,138	434
Volunteers									8	1,506	8	1,506
2. Facilities												
Space									983		983	
Equipment	324		514		59		8				905	
Furniture	5		154		12		5		69		245	
Computer & Kits			54		24				53		131	
3. Staff Training												
4. Materials (Consumable)	169		245		139		90		216		859	
5. Consumable supplies		1		10		1	-	1				13
Food	326	15	435	80	298	15	308	16	40		1,407	126
Other (specify)												
6. Contract Services (Specify)	336		494		294		215		600	1,142	1,929	1,142
										315		315
Medicaid Payments												
7. Travel	18	9	390	55	15	19	13	5			436	88
TOTALS	9,557	146	14,361	414	905	79	5,270	22	1,969	2,963	GRAND TOTAL	
Grand total amounts from each column:	9,703		14,775		984		5,292		4,932		35,686	

VALUE OF
GENERAL HEALTH SERVICES (1.1)



Total: $1,732 4.9% of Total Program Value for Period

The total dollar value (from all available resources) of General Health Services provided by the Bismarck program is presented in the graph above and reflects program services which address the following objectives:

- provide a comprehensive health services program which includes a broad range of medical/dental services to preschool children, to assist the child's physical, emotional, cognitive, and social development toward the overall goal of social competence;
- promote preventive health services and early intervention;
- provide the child's family with the necessary skills and insight and otherwise attempt to link the family to an ongoing health care system to ensure that the child continues to receive comprehensive health care even after leaving the program.

CATEGORICAL COST DATA FOR 1.1 (Category)

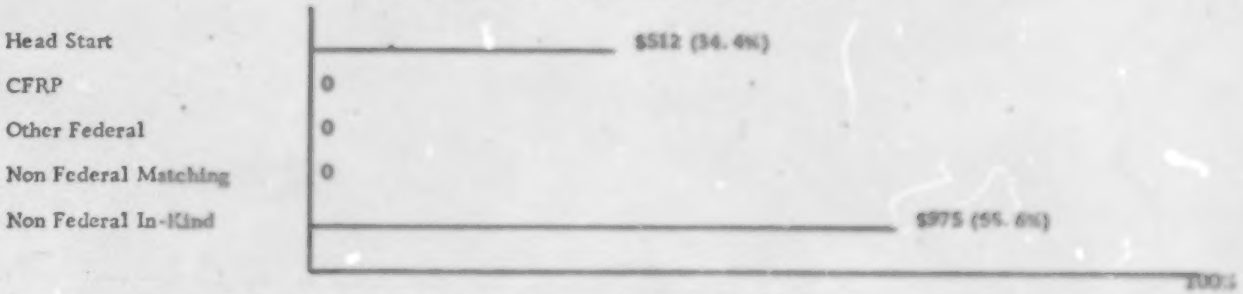
OMB No. 085-S-74013
Approval Expires: 30 June 1975

Categorical Cost Report

Bismark

Item	Source: Fixed or Variable	Head Start Fixed Amount	Head Start Variable Amount	CFRP Fixed Amount	CFRP Variable Amount	Other Fed. * Fixed Amount	Other Fed. * Variable Amount	Non-Fed. Matching* Fixed Amount	Non-Fed. Matching* Variable Amount	Non-Fed. In-Kind* Fixed Amount	Non-Fed. In-Kind* Variable Amount	Totals Fixed Amount	Totals Variable Amount
1. Personnel				1,354								1,354	
Salaries and Wages													
Fringe Benefits													
Consultants			121		79		4						204
Volunteers													
2. Facilities										43		43	
Space													
Equipment													
Furniture													
3. Staff Training													
4. Materials (Reusable)													
5. Consumable supplies													
Food													
Other (specify)													
6. Contract Services (Specify)											108		108
Medicaid Payments													
7. Travel			9		7		2		5				23
TOTALS			130	1,354	86		6		5	43	108	GRAND TOTAL	
Grand total amounts from each source:		130		1,440		6		5		151		1,732	

VALUE OF MENTAL HEALTH SERVICES (1.2)



Total: $1,487 4.2% of Total Program Value for Period

Data on the total dollar value (from all available sources) of Mental Health Services provided by the Bismarck CFRP during the study period is presented in the graph above. Mental Health Services for the purpose of this study are described as those services which address the following objectives:

- assist all children participating in the program in emotional, cognitive, and socail development toward the overall goal of social competence in coordination with the education program and other related component activities;
- provide children with special needs with the necessary mental health services which will ensure that the child and his family achieve the full benefits of participation in the program;
- provide staff and parents with an understanding of child growth and development, an appreciation of individual differences, and the need for a supportive environment;
- provide for prevention, early identification, and early intervention in problems that interfere with a child's development;
- develop a positive attitude toward mental health services and a recognition of the contributions of psychology, medicine, social services, education, and other disciplines to the mental health program; and
- mobilize community resources to serve children with problems that prevent them from coping with their environment.

CATEGORICAL COST DATA FOR 1.2 (Category)

OMB No. 081-S-R0012
Approval Expires: 30 June 1975

Categorical Cost Report

Bramark

Item	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
1. Personnel												
Salaries and Wages			510								510	
Fringe Benefits												
[illegible]												
[illegible]												
[illegible]												
2. Facilities												
[illegible]												
[illegible]												
[illegible]												
[illegible]												
3. Staff Training												
4. Materials (Reusable)												
5. Consumable supplies												
Food												
Other (specify)												
[illegible]												
[illegible]												
[illegible]												
[illegible]												
6. Contract Services (Specify)										900		900
										75		75
[illegible]												
Medicaid Payments												
7. Travel				2								2
TOTALS	-	-	510	2	-	-	-	-	-	975	[illegible]	
[illegible]			512		-		-		975		1,487	

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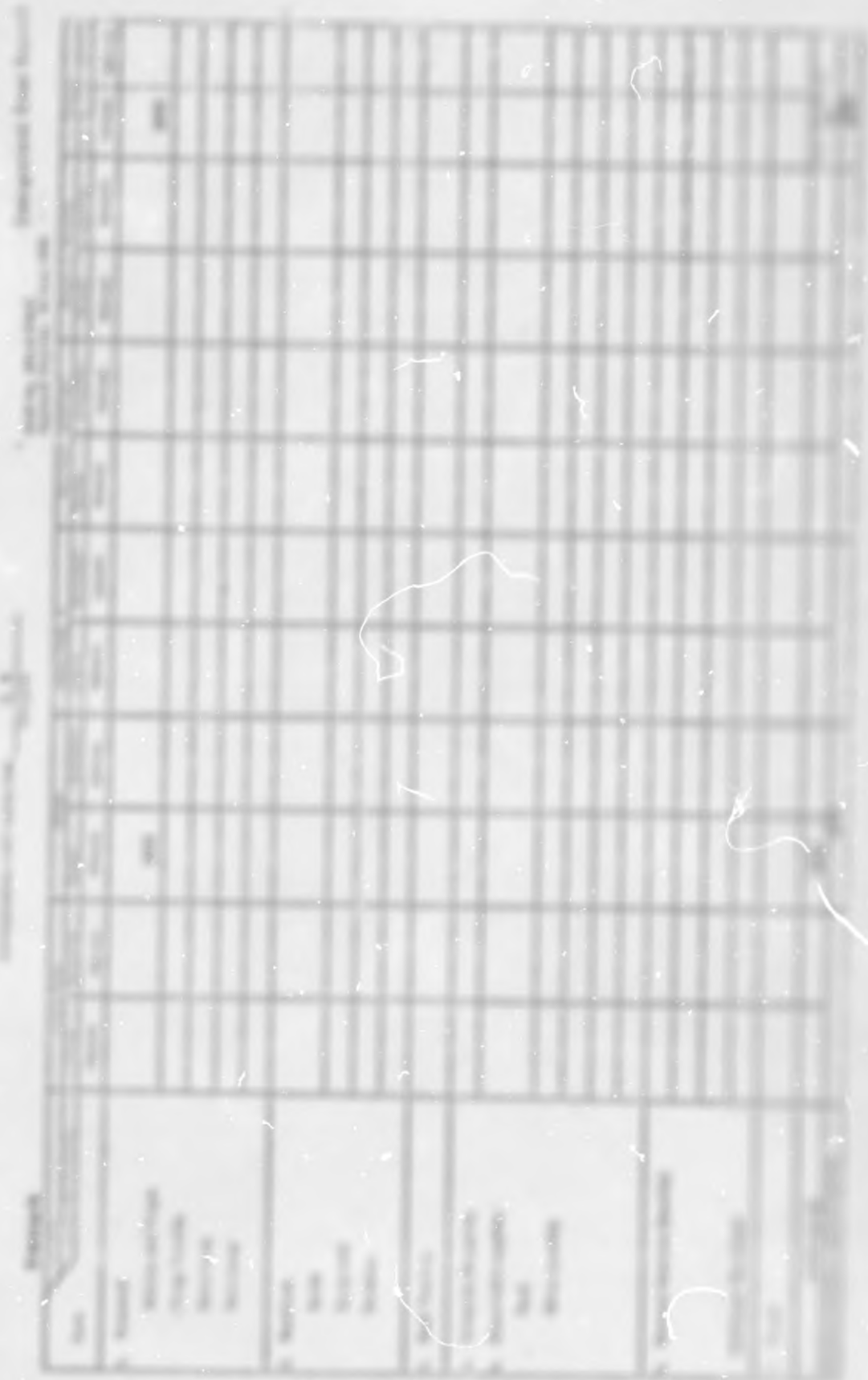
VALUE OF
NUTRITIONAL SERVICES (C.N)

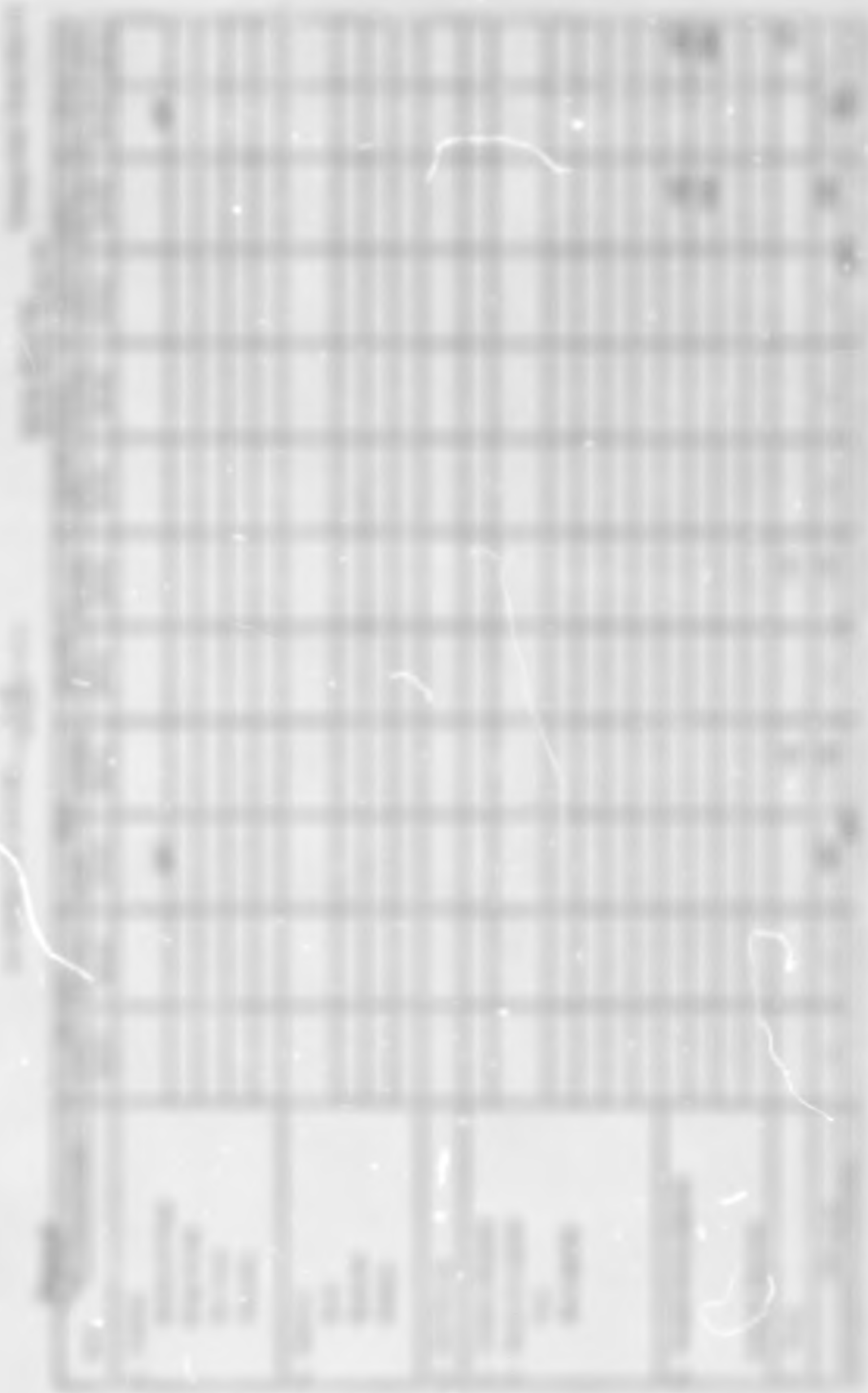
Total: $.99 6.6% of Total Program Value Per Point

The data collected and presented on the graph above is the total dollar value (here all available resources) of additional services provided by the Nursery's CFSP. These services are those which serve to meet the following objectives of the health services component of the program:

- help provide food which will help meet the child's daily nutritional needs in the child's home or in another eleven and pleasant environment, recognizing individual differences and cultural patterns, and thereby promote sound physical, mental, and emotional growth and development;
- provide an environment for nutritional services which will support and promote the use of the feeding situation as an opportunity for learning;
- help staff, child, and family to understand the relationship of nutrition to health, factors which influence food practices, variety of ways to provide for nutritional needs and to apply this knowledge to the development of sound food habits even after leaving the program;
- demonstrate the interrelationship of nutrition to other activities of the program and its contribution to the overall child development goals; and
- involve all staff, parents, and other community agencies as appropriate in meeting the child's nutritional needs so that nutritional care provided complements and supplements that of the home and community.

The data shown on the graph are for a single nutritional services. The costs of individual food programs utilized by each program during the study period is not included in this chart.





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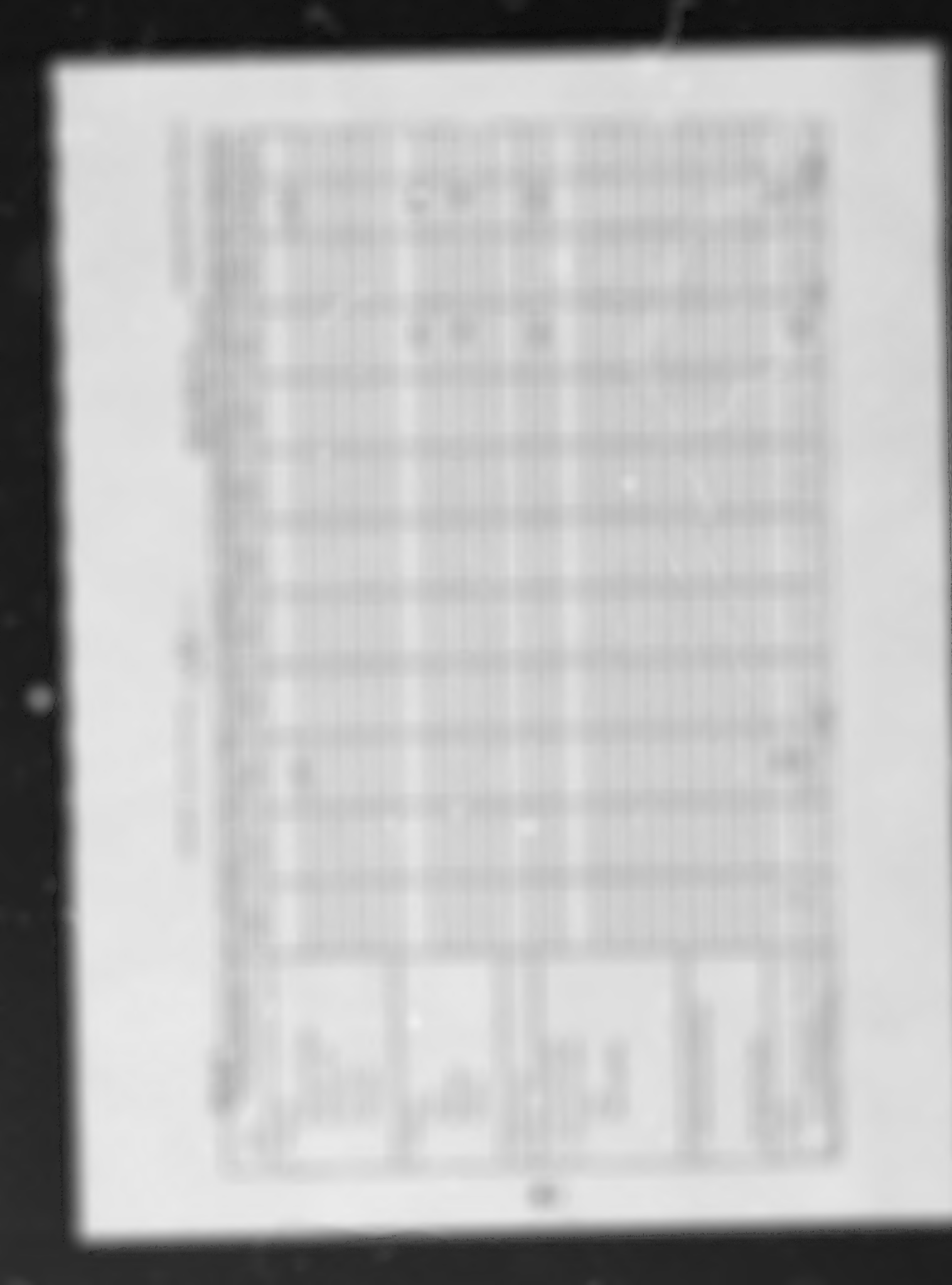

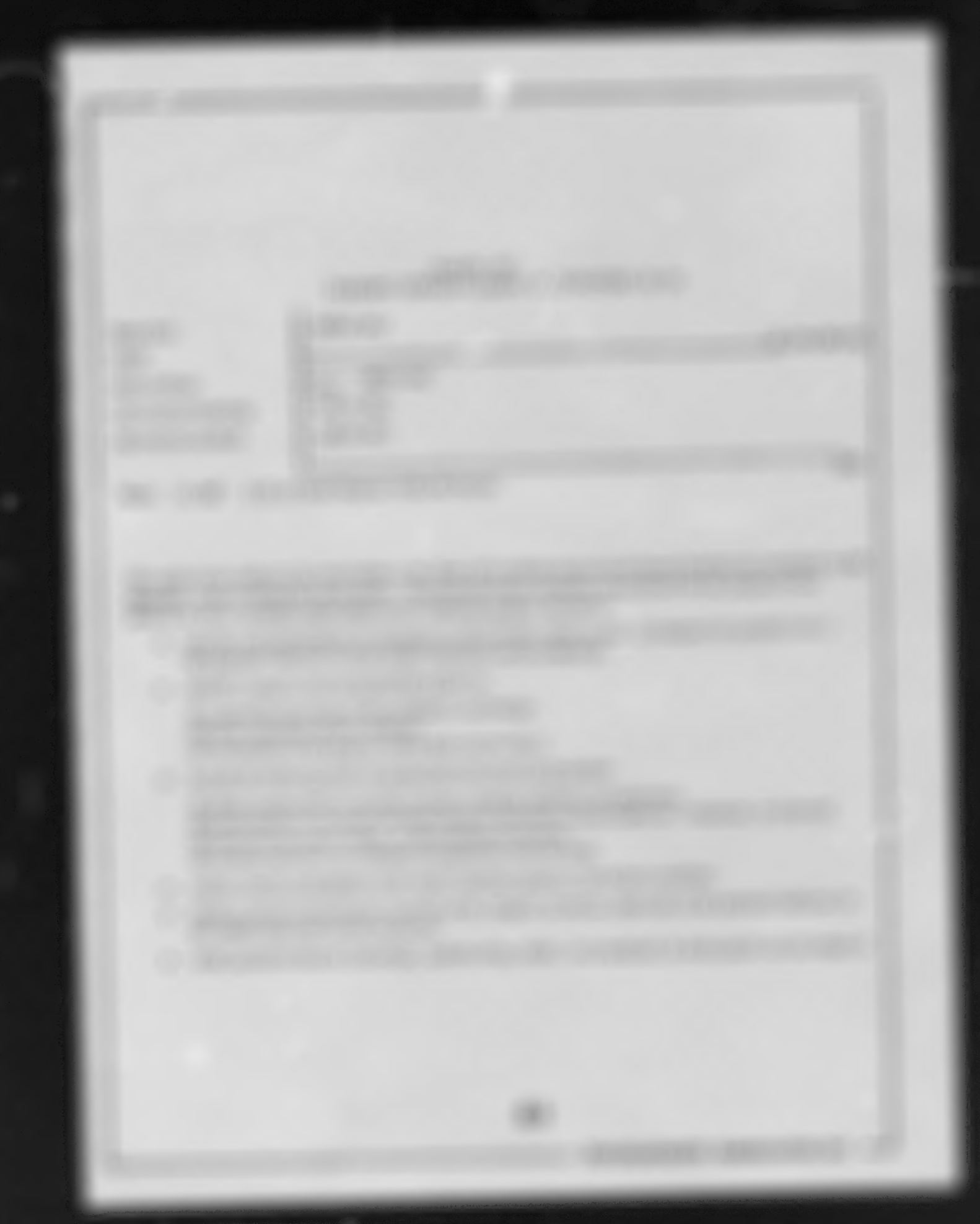

CATEGORICAL COST DATA FOR 4.0 (Category)

OMB No. 009-R-0151
Approval Expires: 30 June 1979

Categorical Cost Report

Bismark

Item	Federal Funds		Match		Other Fed. *		Non-Fed. Matching		Non-Fed. Matching		Totals	
	Federal Share		Matching Share		Federal Share		Matching Share		Matching Share		Total Cost	
	Amounts	Amounts	Amounts	Amounts	Amounts	Amounts	Amounts	Amounts	Amounts	Amounts	Amounts	Amounts
1. Personnel												
Salaries and Wages			645								645	
Fringe Benefits												
Consultants			32	190	32	40					64	230
Volunteers												
2. Facilities												
Space												
Equipment												
Furniture												
3. Staff Training												
4. Materials (Reusable)			23								23	
5. Consumable supplies												
Food		1		10		1		1				13
Other (specify)		15		80		15		16				126
6. Contract Services (Specify)										14		14
Medicaid Payments												
7. Travel				34								34
TOTALS	-	16	700	314	32	56	-	17	-	14		
Grand total (sum of all amounts)	16		1,014		88		17		14		1,149	

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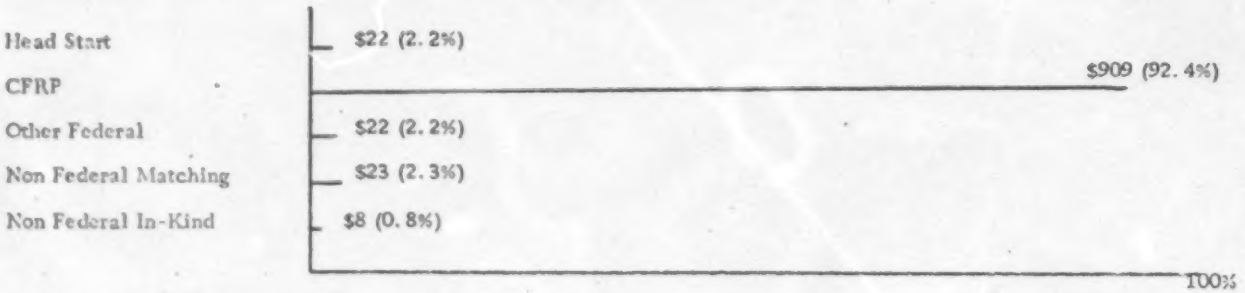
VALUE OF
STAFF TRAINING ACTIVITIES (5.0)



Total: $ 984 2.8% of Total Program Value for Period

The graph above indicates the total dollar value (from all available resources) of staff training activities the Bismarck program conducted during the study period. For the purpose of this study, staff training activities include formal and informal staff meetings; workshops; retreats; demonstrations; work conferences; laboratory, clinical, and field experiences; training in the use of media; cooperative enterprises with nearby projects; and regional and staff institutes.

CATEGORICAL COST DATA FOR 5.0
Category

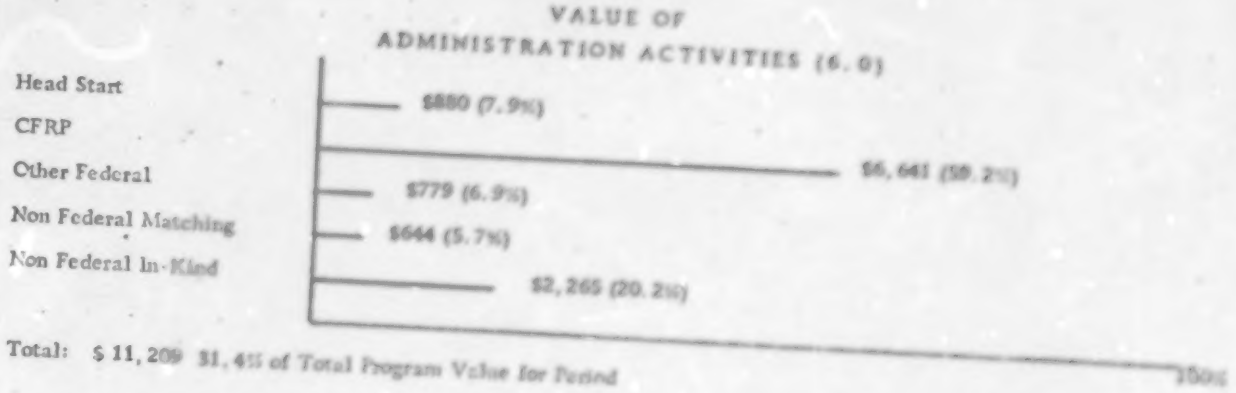
Bismark

OMB No. 085-S-74013
Approval Expires: 30 June 1975

Categorical Cost Report

Item / Source: Fixed or Variable	Head Start Fixed Amount	Head Start Variable Amount	CFRP Fixed Amount	CFRP Variable Amount	Other Fed. * Fixed Amount	Other Fed. * Variable Amount	Non-Fed. Matching* Fixed Amount	Non-Fed. Matching* Variable Amount	Non-Fed. In-Kind Fixed Amount	Non-Fed. In-Kind Variable Amount	Totals Fixed Amount	Totals Variable Amount
1. Personnel												
Salaries and Wages			879								879	
Fringe Benefits												
Consultants												
Volunteers									8		8	
2. Facilities												
Space												
Equipment												
Furniture												
3. Staff Training												
4. Materials (Reusable)	22		22		22		23				89	
5. Consumable supplies												
Food												
Other (specify)												
6. Contract Services (Specify)												
Medicaid Payments												
7. Travel			8								8	
TOTALS	22	-	909	-	22	-	23	-	8	-	[illegible]	
Grand total amounts from each source:	22		909		22		23		8		984	

71



The graph above indicates the total dollar value (from all available resources) of program administration activities by the Bismarck program during the study period. For the purpose of this study, program administration activities are described as those activities which relate to the following functions:

- program management and organization;
- property management which includes records, procurement policies, and procedures;
- financial management; and
- personnel management.

Categorical Cost Report

Stanmark

Item												
1. Personnel												
Salaries and Wages			1,234								1,234	
Fringe Benefits												
Overtime	32		32		32		32				128	
Allowances									1,505		1,505	
2. Facilities												
Space									666		666	
Equipment	22		187		15		8				212	
Furniture	5		156		12		5				176	
Computer									53		53	
3. Staff Training												
4. Materials Available	147		114		117		67				485	
5. Direct-site supplies												
Food												
Other (specify)	322		309		294		304		40		1,269	
6. Contract Services (Specify)	335		469		294		211				1,309	
Contract Payments												
7. Travel	14		61		15		19				109	
TOTALS	860	-	3,141	-	779	-	644	-	2,264			
	860		3,141		779		644		2,264		11,288	

IX. NOTES ON KEY PROGRAM IMPLEMENTATION FACTORS

In retrospect, the Bismarck staff sees six factors that positively influenced the program through the first 18 months. These six points include:

- genuinely and sincerely including community agencies in the planning phase;
- location of the CFRP Center;
- utilization of local staff;
- fully incorporating CFRP into the RECEP;
- pre-service and in-service staff training; and
- program planning flexibility.

1. The close cooperation between Community Agencies and CFRP staff during the planning period set the stage for much of the program implementation policies and procedures and for their continued interaction during Startup and Implementation. Although the Bismarck area has a good system of community resources available to its citizens, the staff feels that the coordination of service functions provides an important catalytic element in delivering services to those in need. This approach fills an acknowledged void in the community without falling into the trap of duplicating services provided by others. This coordination effort and careful program posture to minimize duplication of services has guided CFRP acceptance by the community agencies. This has resulted in strong support, and the cooperation between the greater, community, RECEP staff members and the Policy Council is felt by most CFRP staff members to be an important aspect of their program. Without this cooperation and support, they could not have maintained their program through the difficult times.

2. The location of the CFRP Center has created some difficulties. They had to move during their first year's operation and, in the move, lost a portion of their records and materials. However, in early 1975, they found what they consider an excellent location. The main factors seem to be that most of the families and the resources and services that they require are accessible to the new location.

3. The majority of CFRP's staffing consists of "local" personnel. There is staff consensus that personnel who know the local community are better able to adopt a program approach consistent with and responsive to local conditions, cultures, and mores. They are also aware of geographical conditions which influence program factors.

4. In the preplanning stage, it was decided to amalgamate CEEP into the existing BEEEP. Because BEEEP had three program areas (Teaching, Head Start, and Day Care) with services related to the CEEP's objectives, it was able to provide resources that CEEP would not have effectively obtained in the starting phase. By the Spring of 1971, CEEP was planning a virtual coordinating role as well as providing services to the three agencies for umbrella agency: BEEEP.

5. CEEP pre-service and in-service training was provided within the framework of BEEEP. Although, at first, this created problems due to a lack of full agency specificity on CEEP objectives, it later provided CEEP/BEEEP staff members with an excellent overview of their relationship to related community programs.

   An important aspect of Brunswick's pre-service training included a "get-to-know-up" of each staff member's duties. This gives the staff a better awareness of their responsibilities and their particular role in the total program. Also, in-service workshops and on-site tours of other numbers of programs have proven very valuable.

6. The Brunswick CEEP feels confident they have a program flexible enough to re-establish goals and change direction if program requirements so indicate. They point to the establishment of new programs, such as Parent Aide and 4-H Clubs, as direct results of this flexibility.

Two important factors negatively influenced the Brunswick CEEP. The [illegible] was overly parsed since the second year's grant was delayed and many projects had to operate on a reduced budget utilizing [illegible] funds under the first year's grant. The second was an internal upheaval resulting from a mandate between the Local BEEEP Program Director, CEEP staff and the Parent Policy Council.

1. During the period from July 1970 to January 1971, the Brunswick CEEP did not have great funding. Due to the uncertainty of refunding, a [illegible] was created among staff members. [illegible] were not staff positions but filled, many staff "cut backs" were made. It also gave the impression that only the 4 Family Advocates to serve 84 CEEP families. As a result, a [illegible] lack of services was made available.

2. The internal upheaval between the BEEEP Program Director, CEEP staff and the Parent Policy Council created many problems. Planned [illegible] because change in CEEP staff value and personnel. By the time the conflict was resolved, the program faced many difficulties. The program generated a negative image in the community, services were ill-[illegible] division, there was little communication between staff and, finally, there was a lack of management control.

[illegible]